

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755048

FILED
Mar 11, 2009
Secretary of State

Entity Name: VICTORY BAPTIST CHURCH OF OSPREY, INC.

Current Principal Place of Business:

241 BURNEY RD
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

241 BURNEY RD
OSPREY, FL 34229

New Mailing Address:

FEI Number: 59-2045440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, FRANK R PASTOR
406 OLD VENICE RD
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KELLY, FRANK R
Address: 406 OLD VENICE RD
City-St-Zip: OSPREY, FL 34229

Title: TR () Delete
Name: DE WITT, LUTHER
Address: 4557 MAROLDO AVE
City-St-Zip: NORTH PORT, FL 34287

Title: T () Delete
Name: WESTMORLAND, ROY
Address: 2050 N. MOBILE EST DR.
City-St-Zip: SARASOTA, FL 34231

Title: S () Delete
Name: ELAM, CLAUDETTE
Address: 425 RUBENS DRIVE
City-St-Zip: NOKOMIS, FL 34275

Title: C () Delete
Name: SOUTHARD, DIANNA
Address: 1433 DONA BAY
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: ELAM, CLAUDETTE
Address: 425 RUBENS DRIVE
City-St-Zip: NOKOMIS, FL 34275

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLAUDETTE ELAM

S

03/11/2009

Electronic Signature of Signing Officer or Director

Date